

Executive Summary

Health Care Financing Administration National Medicare Education Program Coordinating Committee Meeting Washington, D.C.

November 3, 1999

A meeting of the Health Care Financing Administration's (HCFA) National Medicare Education Program (NMEP) Coordinating Committee was held on Wednesday, November 3, 1999, from 9 a.m. to noon, at the Loews L'Enfant Plaza Hotel in Washington, D.C. A list of attendees is provided in Attachment A.

Meeting Topics and Synopsis

Welcome and Introductions—Carol Cronin

Ms. Cronin welcomed the Coordinating Committee members, reviewed the agenda, and then asked members to introduce themselves.

NMEP Update—Carol Cronin

Medicare & You 2000 Handbook

Ms. Cronin announced that all the handbooks were mailed and should have been received between September 15 and October 15, which were the target dates. The involvement of the U.S. Postal Service early in the process made this possible. Partners were sent bulk copies of the report as requested, prior to the mailing of the beneficiaries mailing. Other versions of the handbook that will be available are as follows:

- Spanish and English audio books will be available later this week.
- Large print (18- point font) in English and Spanish are being printed and should be available in early November.

About 17 million handbooks contained postcards that asked beneficiaries how easy the handbook was to understand and whether they were able to find what they wanted. An open-ended space for comments was also on the postcard. Statistics regarding the postcards follow:

- c Between 20,000 and 25,000 have been returned, and a preliminary review suggests positive results.
- c An assessment questionnaire was sent to partners, and there have been about 80 responses, which also tended to be positive.
- c HCFA is already planning the handbook for next year based on this feedback.

Medicare Choices Helpline (1-800-MEDICARE)

The phone center received about 5,000 calls a week from March through August. Last week the number of calls climbed to 100,000. This is the result of the more prominent placement of the phone number in the handbook. Additional phone center reports include the following:

- c The average call time is about 5.5 minutes.
- c The States generating the most calls are Florida, New York, and California.
- c The five most frequently asked questions (also noted on the Medicare.gov Web site) are:
 - What does Medicare Part B not pay for?
 - What Medigap policies will be available where plans are terminating?
 - What types of services are covered under Medicare Parts A and B?
 - What is Medicaid and what does it cover?
 - What options are available if my plan does not renew?

www. Medicare.gov

The Web site, www.Medicare.gov, had more than 1 million page views or more than 6 million hits last month. Nursing Home Compare and Medicare Compare were the most viewed pages.

Regional Education About Choices in Health (REACH)

The REACH campaign has implemented more than 1,300 planned activities across the country through the Regional Offices and partners. The regions implemented 350 activities around plan terminations. The top three planned outreach activities are:

- c Presentations (1)
- c Public meetings (3)
- c Health fairs (2)

***Medicare & You* Publicity and Promotion Campaign**

Three thousand press kits were distributed to reporters across the country, and especially to smaller papers, in October. Events with libraries, in collaboration with the American Library Association, were conducted across the Nation, and the library edition of *Medicare & You* is completed and being sent to 16,000 libraries.

Nonrenewals

HCFA is distributing a letter to beneficiaries who are in counties that have no other managed care alternatives because of nonrenewals. HCFA is notifying the beneficiaries of Medigap information. A letter is being mailed to 70,000 beneficiaries.

Consumer Assessment of Health Plans Survey (CAHPS)

The survey is in its third year with about 216,000 beneficiaries being sent questionnaires in early September. By early October, there had been 105,000 responses. Follow-up to increase the response rate will run through December.

Medigap Compare

As part of the development of Medigap Compare, a description of Medigap Compare was made available on the Medicare.gov Web site this month. More information will be available by the end of the year.

HCFA and Administration on Aging Teleconference

Ms. Cronin announced that on November 15 there would be a teleconference for local staff interested in learning about the Medicare information resources available to them. The satellite broadcast is scheduled for 1 to 3 p.m. More information can be obtained on the SPRY Foundation Web site www.spry.org.

Medicare Matrix—Bob Logan

Mr. Logan presented the Medicare Matrix, decision-support software designed to enhance Medicare beneficiary counseling. He oriented everyone to the contents of the program, which is available in two formats (The Navigator which includes managed care and Medigap and Medigap only.) He also gave a demonstration of the information the program generates as a result of an individual's responses to specific questions about their health care usage.

He made the following points:

- c The program is able to estimate the approximate out-of-pocket costs for specific health plans based on information provided by the beneficiary.
- c Estimated Medigap out-of-pocket costs will be available in the next generation of *M-Matrix*.
- c Prescription caps are already reflected in the current edition.
- c Data on Medicare managed care plans come from Medicare Compare.
- c Durable medical equipment is not included now; but may be in the future.

Outreach Calendar Database Demonstration—Sheila Wilcox

Ms. Wilcox told the group that the Outreach Calendar Database enables partners and beneficiaries to find the Medicare education activities of interest anywhere in the United States. She demonstrated the Outreach Calendar by walking the group through examples. The calendar for beneficiaries is available on Medicare.gov. The calendar with Partner and beneficiary events is under "News Services" on nmep.org.

Ms. Cronin announced that once the calendar is well established, it would be promoted more vigorously, as was done with 1-800-MEDICARE.

Plans for Managed Care Organizations Summary of Benefits Results to Date—John Sirmon

Mr. Sirmon reported that work groups are standardizing the language used by health plans to describe their summary of benefits. The desired result is to have a data-driven product that will enable the presentation and comparison of benefit packages from health plans. Mr. Sirmon and others made the following points:

- The Summary of Benefits (SB) will be an output report of the new Plan Benefit Package (PBP) for 2001. The PBP will replace the text presentation of benefits with a data driven presentation. The PBP is a Medicare managed care contract requirement and is submitted as part of the Adjusted Community Rate Proposal (ACRP). HCFA approves the ACRP prior to the release of the SB to CBS beneficiary information campaign and MCO marketing efforts.
- Health plans have raised questions about how to amend the model summary of benefits to reflect additional benefits and questions about the model language.
- Focus groups with 500 beneficiaries will test the presentation of the summary of benefits. These focus groups will be completed in early 2000.
- Selected data will be included in Medicare Compare in 2000.
- The new summary of benefits should be included in the *Medicare Matrix* in the future because the data will be incorporated into Medicare Compare. However, only about 10 percent of the data from the summary of benefits goes into Medicare Compare.
- The Plan Benefits Package (PBP) is expected to be online for 2001. It is currently going through the OMB paperwork reduction clearance.
- The Government Accounting Office praised HCFA for developing the PBP and supports full implementation of the new tool for 2001.
- Only benefits can be included in the PBP and SB. The definition of a benefit can be found in the BBA Interim Final Rule. Services offered by affiliation with the CO (e.g., discounts) cannot be included.

Disenrollment Rates/Survey—Tom Reilly

Dr. Reilly presented survey results providing the reasons for disenrollment along with the disenrollment rates. In addition, different formulas for calculating disenrollment rates are being compared to determine which would be most helpful to the consumer. Dr. Reilly made the following points about current disenrollment rates used by HEDIS:

- The HEDIS rate was intended to provide an indicator of stability of enrollment rather than to provide consumer information.
- The HEDIS rate includes involuntary disenrollment, such as those resulting from death or relocating.
- The HEDIS rate does not include those who enter and leave the plan during the year.
- The new rate will try to measure voluntary disenrollment; the next steps include:

- Obtain input in November 1999
- Generate disenrollment rates by the end of December 1999
- Test language with consumers in November and December
- Report 1998 rates in static file in February.

Dr. Reilly described the survey reasons for disenrollment as follows:

- The survey will be conducted separately from the CAHPS.
- Mail with phone followup will be used.
- The survey will be conducted quarterly and reported annually.
- Rates will be available by June 2001.
- Eventually will develop standard disenrollment forms to collect the data.

Dr. Reilly described the CAHPS survey of disenrollees as follows:

- Will be included as part of managed care CAHPS survey, beginning with Round 4, in the Fall of 2000.
- Will produce CAHPS estimates for fall plan population, including current enrollees and disenrollees.

Lessons Learned in Consumer Education Managed Care Organizations—Maggie Lovelace

Ms. Lovelace, Kaiser Permanente, reported that Kaiser Permanente had partnered with the Arlington County Council on Aging and Ombudsman program to conduct a focus group of the plan's Medicare beneficiaries and their reaction to available Medicare information. The focus group generated the following responses:

- The disabled have limited access to information.
- Medicare materials are too bulky and burdensome.
- Specific Medicare coverage information should be available at the emergency point of services (i.e., hospital).
- Interest heightens when sickness occurs.
- Few beneficiaries know about Medicare Parts A and B coverage in reference to doctor and hospital visits.
- Beneficiaries are interested in additional Medicare costs and what options are available.
- Medicare beneficiaries are interested in information about fraud and abuse.
- Thirty percent of the participants had access to the Internet, but they were unaware of the HCFA Web site.

Suggestions from the focus groups were to obtain easy-to-read information on an ongoing basis and to have material available at the time of need. A proposed format is to have short bulletins, or one-page fact sheets, highlighting topics and to have these materials available through doctors' offices. Other effective outlets are through the mail, grassroots organizations, and audio and video media options.

Kaiser Permanente conducts extensive outreach activities. The plan offers prevention classes and distributes health publications to each member. Kaiser Permanente also has KP Online, an educational Web site to provide additional information.

Consumer Education on Y2K in the Medicare Program—Lis Handley

Ms. Handley reported on HCFA's Y2K preparations. HCFA conducted focus groups in March to determine what reactions and expectations beneficiaries were experiencing related to Y2K. The results of the focus groups are:

- Awareness of and exposure to Y2K has increased.
- There is overall low concern regarding Y2K.
- Health care worries ranked lower than other Y2K problems.
- Not worried about being denied access to health care.
- Y2K is considered most likely to affect billing.
- Providers are not expected to refuse services.
- HCFA's messages are well received by beneficiaries.

HCFA has developed communication products to inform and reassure beneficiaries. These products include:

- Toll-free line (1-800-MEDICARE)
- Trifold brochure
- ESRD brochure on preparedness
- Web site
- HCFA staff and 1-800-MEDICARE, ready to respond with Q's & A's
- Social Security Administration mailing
- Information in *Medicare & You 2000* Handbook.

Specifically for the NMEP partners, HCFA recommends disseminating the Y2K beneficiary messages, including the toll-free number in Y2K resources, and linking to www.Medicare.gov from their Web sites.

Open Discussion of Partner Activities—All Participants

During this session of the meeting, Coordinating Committee members reported on current activities such as the following:

- **American Association of Homes and Services for the Aging** will be launching its Web site next month, developing issue briefs, and collaborating with the National Council on Aging to conduct a survey.
- **AARP** launched its educational campaign on Medicare + Choice by placing an ad in PARADE magazine and referencing the Medicare Choices Helpline and the local SHIP for additional information. AARP is also leading information and educational sessions through its regional offices around the country.

- **National Asian Pacific Center on Aging (NAPCA)** has completed four of six detailed Chinese translations of HCFA documents. The demand for these publications has doubled and NAPCA will work with HCFA Regional Offices to distribute the materials. The materials are also available on www.napca.org. NAPCA also translated materials into Korean, Vietnamese, Tonga, Samoan, and Filipino.
- **Consultants for Corporate Benefits** conducted a health fair with all the carriers for employers/employees. HCFA was invited to present on Medicare + Choice. The health fair prompted good participation from Medicare beneficiaries/retirees.
- **Medicare Rights Center** revised its "traffic light" chart, and it is now available in Spanish.

Suggested Topics for Next Meeting—All Participants

The proposed topics for the next meeting are:

- Horizon program (HCFA grants)
- National Asian Pacific Center on Aging presentation
- Beneficiary manual demonstration
- Appeals and notices
- Open enrollment for 2001
- Demonstration of plan benefit program
- Update on the BBA legislation
- American Association of Homes and Services for the Aging update on materials.

The 2000 schedule for the NMEP Coordinating Committee meetings is as follows:

- January 26
- April 26
- July 26
- October 25.

**National Medicare Education Program
Coordinating Committee Meeting
Loews L'Enfant Plaza Hotel
Washington, D.C.
November 3, 1999**

Attachment A: List of Attendees

AARP

Ms. Ava Baker
Ms. C. Anne Harvey

Administration on Aging

Ms. Irma Tetzloff

AFL-CIO

Ms. Ashley Nellis

American Association of Health Plans

Ms. Candace Schaller

**American Association of Homes and
Services for the Aging**

Ms. Judy Peres
Ms. Susan Reinhard
Ms. Robyn Stone

**American Bar Association, Commission
on Legal Problems of the Elderly**

Ms. Leslie Fried
Ms. Erica Wood

American Hospital Association

Ms. Ellen Pryga

American Medical Association

Ms. Sharon McIlrath

Bell Atlantic Network Services

Ms. Sheila Meehan

Blue Cross and Blue Shield Association

Ms. Jane Galvin

Consumer Coalition for Quality HealthCare

Mr. Alfred Chiplin

**Department of Health and Human Services
Office of the Assistant Secretary**

Ms. Joan Sokolovsky

EDS

Ms. Lola Jordan

**Georgetown University Medical Center
Institute for Health Care Research and Policy**

Ms. Geraldine Dallek

Health Insurance Association of America

Ms. Marianne Miller

Hewitt Associates LLC

Mr. Frank McArdle

**Joint Commission on Accreditation of
Healthcare Organizations**

Mr. Anthony Tirone

Medicare Rights Center

Ms. Diane Archer

National Asian Pacific Center on Aging

Mr. Clayton Fong

National Association of Area Agencies on Aging

Ms. Adrienne Dern

National Association of Health Underwriters

Ms. Nancy Trenti

**National Association of Insurance
Commissioners**

Ms. Alethia Jackson

National Association of State Units on Aging

Ms. Monika Ringette

National Caucus and Center on Black Aged

Ms. Nancy Caliman

**National Committee to Preserve Social Security
and Medicare**

Ms. Danielle Jones

National Council on the Aging, Inc.

Ms. Glendale Johnson

National Indian Council on Aging

Ms. Rebecca Baca

Office of Personnel Management

Ms. Agnes Kalland

Ms. Ellen Tunstall

Older Women's League

Sarah Gotbaum, Ph.D.

Seabury & Smith

Ms Michele Armesto

**State Health Insurance and
Assistance Programs**

Ms. Bernice Hutchinson

Towers Perrin

Mr. Kevin McCarthy

Mr. Christopher Condeluci

VHA, Inc.

Mr. Edward N. Goodman

William M. Mercer, Inc.

Mr. Ed Susank

IQ Solutions, Inc.

% Ted Buxton

% Ms. Meredith Mastal

Invited Guests

% Holly Nelson

Consultant

(formerly with Department of Labor)

% Aimee Schenkel

Consultants for Corporate Benefits

% Deborah Weber

Aspen Systems Corporation

% Richard Yelle

Aspen Systems Corporation

Health Care Financing Administration

% Mr. Bob Adams

% Mr. Peter Ashkenaz

% Ms. Debra Balas

% Ms. Shelly Boyd

% Ms. Carol Cronin

% Ms. Kelly DiNicolò

% Ms. Jenny Dobbin

% Ms. Lorna Evans

% Ms. Lis Handley

% Ms. Rena Judy

% Mr. Eric Katz

% Ms. Harriet Kelman

% Ms. Crystal Kuntz

% Ms. Mary Agnes Laureno

% Ms. Michael McMullan

% Ms. Paul Mendelsohn

% Mr. Steve Newman

% Ms. Ana Nunez-Poole

% Dr. Tom Reilly

% Mr. Mel Sanders

% Mr. Spencer Schron

% Ms. John Sirmon

% Mr. Joe Slattery

% Ms. Sheila Wilcox

